

**Fill in this information to identify the case:**

Debtor name Battery 17 Parking LLC  
 United States Bankruptcy Court for the: Southern District of NY  
 (State)  
 Case number (If known): 20-10510-mg

Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year		Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>01/01/20</u> <u>MM / DD / YYYY</u> to _____ Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>46,485</u>
<b>For prior year:</b>	From <u>01/01/19</u> <u>MM / DD / YYYY</u> to <u>12/31/19</u> <u>MM / DD / YYYY</u>	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>253,602</u>
<b>For the year before that:</b>	From <u>01/01/18</u> <u>MM / DD / YYYY</u> to <u>12/31/18</u> <u>MM / DD / YYYY</u>	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>220,643</u>

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

		Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From _____ to _____ <u>MM / DD / YYYY</u> to Filing date	_____	\$ _____
<b>For prior year:</b>	From _____ to _____ <u>MM / DD / YYYY</u> to <u>MM / DD / YYYY</u>	_____	\$ _____
<b>For the year before that:</b>	From _____ to _____ <u>MM / DD / YYYY</u> to <u>MM / DD / YYYY</u>	_____	\$ _____

Debtor Battery 17 Parking LLC  
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**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**
**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	_____
<b>Relationship to debtor</b> _____			
4.2. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	_____
<b>Relationship to debtor</b> _____			

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**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1.			
Creditor's name			\$ _____
Street			
City	State ZIP Code		
5.2.			
Creditor's name			\$ _____
Street			
City	State ZIP Code		

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name			
Street			\$ _____
City	State ZIP Code		
Last 4 digits of account number: XXXX- _____			

**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1.			
Case title		Name	<input type="checkbox"/> Pending
Case number		Street	<input type="checkbox"/> On appeal
		City State ZIP Code	<input type="checkbox"/> Concluded
7.2.			
Case title		Court or agency's name and address	<input type="checkbox"/> Pending
Case number		Name	<input type="checkbox"/> On appeal
		Street	<input type="checkbox"/> Concluded
		City State ZIP Code	

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**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Custodian's name and address	Description of the property	Value
Custodian's name		\$ _____
Street	Case title	Court name and address
City _____ State _____ ZIP Code _____	Case number	Name _____ Street _____
	Date of order or assignment	City _____ State _____ ZIP Code _____

**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$ _____
Street			
City _____ State _____ ZIP Code _____			
Recipient's relationship to debtor			
9.2. Recipient's name			\$ _____
Street			
City _____ State _____ ZIP Code _____			
Recipient's relationship to debtor			

**Part 5: Certain Losses**

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		\$ _____
			\$ _____

Debtor Battery 17 Parking LLC \_\_\_\_\_ Case number (if known) 20-10510-mg \_\_\_\_\_  
Name \_\_\_\_\_**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
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11.1. \_\_\_\_\_ \$ \_\_\_\_\_

**Address**Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Email or website address****Who made the payment, if not debtor?**

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
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11.2. \_\_\_\_\_ \$ \_\_\_\_\_

**Address**Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Email or website address****Who made the payment, if not debtor?****12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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\_\_\_\_\_ \$ \_\_\_\_\_

**Trustee**

\_\_\_\_\_

Debtor Battery 17 Parking LLC  
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**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<b>Address</b> Street _____ City _____ State _____ ZIP Code _____			
<b>Relationship to debtor</b> _____			
13.2. _____	_____	_____	\$ _____
<b>Address</b> Street _____ City _____ State _____ ZIP Code _____			
<b>Relationship to debtor</b> _____			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1. Street _____ City _____ State _____ ZIP Code _____	From _____ To _____
14.2. Street _____ City _____ State _____ ZIP Code _____	From _____ To _____

Debtor

Battery 17 Parking LLC  
Name

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**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9.

Type text here

 Yes. Fill in the information below.**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.1.

Facility name

Street

**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.**How are records kept?**

City

State

ZIP Code

*Check all that apply:* Electronically Paper**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.2.

Facility name

Street

**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.**How are records kept?**

City

State

ZIP Code

*Check all that apply:* Electronically Paper**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?** No. Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

 No Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?** No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

 No. Go to Part 10. Yes. Fill in below:**Name of plan****Employer identification number of the plan**

EIN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Has the plan been terminated?

 No Yes

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**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None Type here

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Name _____  Street _____  City _____ State _____ ZIP Code _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. Name _____  Street _____  City _____ State _____ ZIP Code _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____  Street _____  City _____ State _____ ZIP Code _____	_____  _____	_____  _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>Address</b> _____  _____			

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____  Street _____  City _____ State _____ ZIP Code _____	_____  _____	_____  _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
<b>Address</b> _____  _____			

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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	
City _____ State _____ ZIP Code _____			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____	_____	<input type="checkbox"/> Pending
_____	Street _____	_____	<input type="checkbox"/> On appeal
City _____ State _____ ZIP Code _____			<input type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Debtor Battery 17 Parking LLC  
Name \_\_\_\_\_

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**24. Has the debtor notified any governmental unit of any release of hazardous material?**

Type  No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____ Street _____ _____	Name _____ Street _____ _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____	_____	_____

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ <b>Dates business existed</b> From _____ To _____
25.2. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ <b>Dates business existed</b> From _____ To _____
25.3. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ <b>Dates business existed</b> From _____ To _____

Debtor Battery 17 Parking LLC Name \_\_\_\_\_ Case number (if known) 20-10510-mg

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address			Dates of service	
26a.1. John Lepore			From <u>2/2018</u>	To <u>Present</u>
Name 4220 Merrick Road	Street			
Massapequa	NY	11758	ZIP Code	

Name and address			Dates of service	
26a.2.			From _____	To _____
Name	Street			
City	State	ZIP Code		

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address			Dates of service	
26b.1.			From _____	To _____
Name	Street			
City	State	ZIP Code		
Name and address			Dates of service	
26b.2.			From _____	To _____
Name	Street			
City	State	ZIP Code		

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address			If any books of account and records are unavailable, explain why
26c.1.			
Name	Street		
City	State	ZIP Code	

Debtor Battery 17 Parking LLC Name \_\_\_\_\_ Case number (if known) 20-10510-mg

<b>Name and address</b>	<b>If any books of account and records are unavailable, explain why</b>
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26c.2.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

<b>Name and address</b>
-------------------------

26d.1.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

<b>Name and address</b>
-------------------------

26d.2.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

<b>Name of the person who supervised the taking of the inventory</b>	<b>Date of inventory</b>	<b>The dollar amount and basis (cost, market, or other basis) of each inventory</b>
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

<b>Name and address of the person who has possession of inventory records</b>
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27.1.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Debtor**

Battery 17 Parking LLC

Name

Case number (if known) 20-10510-mg

Debtor

Battery 17 Parking LLC

Name

Case number (if known) 20-10510-mg

Name and address of recipient

30.2

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No

Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03 02 2020  
MM / DD / YYYY

/s/ Ronald Massie

Signature of individual signing on behalf of the debtor

Printed name Ronald Massie

Position or relationship to debtor Sole Managing Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No

Yes